

# SUMMARY REPORT DIGEST

## CHICAGO POLICE DEPARTMENT

LOG NO

1052142

TYPE

CR, U

DATE OF REPORT

29-SEP-2014

INSTRUCTIONS: To be used in all cases that are to be classified as either EXONERATED, UNFOUNDED, NOT SUSTAINED, NO AFFIDAVIT, or in SUSTAINED cases where the Disciplinary Recommendation does not exceed Five (5) DAYS SUSPENSION.

TO: CHIEF ADMINISTRATOR, INDEPENDENT POLICE REVIEW AUTHORITY

FROM - INVESTIGATOR'S NAME	RANK	STAR NO	EMPLOYEE NO	UNIT ASSIGNED	UNIT DETAILED
REYNOLDS, KYMBERLY	9182			113	

REFERENCE NOS.(LIST ALL RELATED C.L., C.B., I.R., INVENTORY NOS., ETC., PERTINENT OF THIS INVESTIGATION)

INCIDENT ADDRESS	DATE / TIME	BEAT
	27-FEB-2012 02:02	421

### ACCUSED

NAME	RANK	STAR NO	EMP NO	UNIT ASSIGNED	UNIT DETAILED	SEX/RACE	DOB	APPOINTED DATE	ON DUTY ?	SWORN ?
MEADOWS SR, CHARLES E	9161	4438		606		M / BLK		30-JUL-2007	YES	YES

### REPORTING PARTY

NAME	ADDRESS*	CITY STATE	TELEPHONE	SEX / RACE	DOB / AGE
MC DERMOTT, SARAH	RANK: 9173, STAR NO: 500, EMP NO		Bad Phone No:	F / WHI	/ 49

### VICTIMS

NAME	ADDRESS*	CITY STATE	TELEPHONE	SEX / RACE	DOB / AGE
MEADOWS SR, CHARLES	RANK: 9161 STAR NO: 4438, EMP NO#			M / BLK	/ 32

### WITNESSES

NAME	ADDRESS*	CITY STATE	TELEPHONE	SEX / RACE	DOB / AGE
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\* IF CPD MEMBER, LIST RANK, STAR, EMPLOYEE NOS. IN ADDRESS, PAX/BELL IN TELEPHONE BOX.

### ALLEGATIONS

SEE CLEAR

## SUMMARY

SEE CLEAR

## ATTACHMENTS

INVESTIGATIVE REPORTS -  
SUPPORTING ALLEGATIONS LIST  
ATTACHMENTS NUMBER

INVESTIGATIVE REPORTS -  
SUPPORTING ACCUSED MEMBERS(S)  
LIST ATTACHMENTS NUMBER:

PHYSICAL EVIDENCE  
LIST ATTACHMENTS  
NUMBERS:


TOTAL NUMBER OF  
ATTACHMENTS SUBMITTED  
WITH THIS FILE:

19

## FINDINGS - RECOMMENDATIONS

Accused:  
Allegation #1

Officer Charles Meadows Sr., #4438  
See Mediation Agreement.

  
IPRA Supervisor Dave Marzullo, #27

DATE INITIATED  
(Date incident was received for investigation)

01-MAR-2012

DATE COMPLETED (Date of this report)

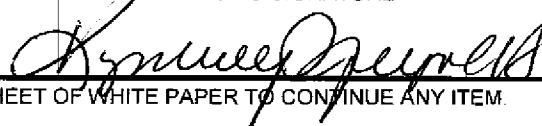
29-SEP-2014

ELAPSED TIME  
(Total time expressed in days)

942

Investigator will initiate the Command Channel Review form by  
completing the Investigator's Section.

INVESTIGATOR'S SIGNATURE



IF NECESSARY, USE AN 8 1/2 x 11" SHEET OF WHITE PAPER TO CONTINUE ANY ITEM.